

KENTUCKY EMERGENCY PREPAREDNESS

2007 SUMMIT REPORT



THE KENTUCKY COUNCIL ON
DEVELOPMENTAL DISABILITIES

I. SUMMARY

In January of 2007, a delegation of state employees whose role within state government includes supporting the state in the event of a disaster and supporting individuals with disabilities, children in foster care and the elderly held a summit to address the specific needs of this population in Kentucky in either a natural or manmade disasters.

The targeted outcome for the summit was to bring together individuals with disabilities, children in foster care, the elderly and their support network and emergency service personnel and others who provide support services to vulnerable populations to:

- a. Reduce duplication of and provide easy access to information on emergency disaster services in order to enhance emergency support.
- b. Provide information and support to those who provide emergency disaster support to vulnerable population.
- c. Gather information on current activities and services provided around the state.

The one day summit hosted over 130 people representing 20 state and local agencies and individuals with disabilities and the elderly. Those participating were asked to explore, comment and make recommendations on three key areas of emergency management – preparedness, response and recovery.

II. HISTORY

In June of 2006 a working conference on emergency management and individuals with disabilities and the elderly was held in Washington D.C. The purpose of this working conference, jointly sponsored by the U.S. Departments of Health and Human Services (HHS) and Homeland Security (DHS), was to bring together Governor-appointed State teams including emergency management officials and key disability, aging, and health experts to connect and to work toward integration of efforts within their jurisdiction's emergency management framework; to facilitate cooperative planning with senior officials from Regional Offices of Federal agencies; to identify and institute measurable outcomes and systems for tracking actions taken following the conference; and to strengthen State and Regional capacity to assist individuals with disabilities and the elderly in an emergency. (June 2006 Conference brochure)

Each State and the District of Columbia's Governor were asked to send four or five delegates. Kentucky sent representatives from the Office Homeland Security, the Division of Emergency Management, the Department of Aging, and the Council on Developmental Disabilities, Department of Community Based Services and the Department for Public Health.

Each day of the three day conference focused on a specific area of emergency management (preparedness, response and recovery). The morning was dedicated to presentations on possible solutions to current issues related to emergency management and individuals with disabilities and the elderly. During afternoon sessions state teams

met as a group and with other states in their federal emergency management region to exchange ideas of supporting the target population of this conference.

Following the conference the delegation made a commitment to continue their efforts within their state and to file a quarterly report to the Administration on Developmental Disabilities on improvements made at the state level in the area of emergency management for the target audience. The delegation has continued to meet and has included children in foster care in their reporting. (Reports can be found at www.add.gov)(2007)

III. KENTUCKY DEMOGRAPHICS

According to the US 2000 Census 12.6% of the population of Kentucky is over 65 compared to the national average of 12.4%. The number of individuals over the age of 5 with a disability is 874,156 and the poverty rate is 14.9% compared with the national rate of 12.5%. (www.census.gov)

In the 1960s Kentucky's population became predominantly urban for the first time and by 2000, 56 percent of the population lived in urban areas, compared with 45 percent in 1960. The decline in rural population and growth of urban areas has been constant since the 1940s. These shifts in population have been largely a result of people moving from rural to urban areas in search of better employment. (http://encarta.msn.com/encyclopedia_761554924_4/Kentucky.html)(2007)

In Kentucky 15.82% of the population is living at or below the poverty level. Seven counties in eastern Kentucky are part of the U.S. Census Bureau's list of the 50 poorest counties in the country and Owsley County ranks as the seventh poorest county in the nation. (www.christianapp.org)(2007).

IV. CHALLENGES

The decline in rural population has left many individuals who have a disability and/or are elderly spread out in remote and difficult to access areas. The remoteness lends itself to a decrease in the availability of services and difficulty in reaching this population. Many individuals with disabilities and the elderly who reside in urban areas predominately live in densely, lower socio-economic populated areas of a city and or town. This living environment also causes a decrease in services availability and accessibility.

The fact that the majority of individuals with a disability and/or are aging have incomes at or below the poverty level further compounds the ability to ready these individuals for emergency situations much less assuring preparedness in the event of an emergency. The ability to store supplies such as medication and food is an unreal expectation for many individuals. Many of these individuals are working on day to day survival and cannot envision preparing further than one day at a time.

The benefit of having many individuals connected to the human service system in one way or another is that systems in place make it easier to know who they are and how to locate them. However there are many individuals who for one reason or another are not connected to the service system. These individuals are the ones who pose the greatest

challenge to first responders. By not being linked in some capacity to the service system the task of locating everyone in need becomes virtually impossible.

Many individuals may be skeptical of anything related to government and lists. This is especially true for immigrants who may be in the US and Kentucky illegally. Many do not view preparedness as a high priority. It has been noted that the elderly in particular, who have survived a depression and war, have an acceptance for their wellbeing and that 'what will be will be'. Many may not have access to local media or on line services; therefore the ability to reach individuals can be difficult. Those individuals that pose a communication challenge, whether it is a language barrier and/or the inability to comprehend instructions can lead to confusion and risk for not only the individuals but the first responder. A registry has been suggested as a means to assist individuals in voluntarily providing information for first responders. Thus far efforts at the local level have been relatively unsuccessful.

The challenge for those involved in outreach, protection and service provision is to reach as many individuals as possible, demonstrate the need for preparedness and provide support as warranted. However, attempts thus far in reaching these individuals through public service events have not been shown to be effective. It is of utmost importance to continue outreach efforts at every level. This needs to occur even when those who need the service are not particularly interested.

V. ISSUES

The term stakeholder will be used though out this section. It refers to a statewide working group including emergency management personnel, individuals with disabilities, the elderly, their support network, advocacy groups, other vulnerable population's members, state and local community leaders, elected officials and others with relevant knowledge for the topic.

A. Preparedness

A. 1. Issue: Special Needs Definition and Registry:

There appears to be a multitude of barriers to full implementation of what some consider one of the most effective ways to assure supportive services in the event of an emergency.

The State has not adopted a definition of 'special needs', thus there is not a specific criteria that can be used in planning for this defined population. A standardized definition would offer consistency throughout the state when offering discussion/technical support during an event.

Without a clear definition it is difficult to develop a methodology for utilization of a registry thereby leaving each community to act on its own. In a disaster this could potentially lead to confusion if other jurisdictions are called upon to lend assistance and are not aware of the scope and purpose of 'special needs' registry.

Regardless of effort to define and offer registries, at local levels, the overall utilization has been limited as individuals, for a variety of reasons, appears to be unwilling to

participate or is unaware that a registry exists. Some have voiced skepticism of anything related to government. They are fearful that the information will be used for purposes for other than those specified. Others do not view the registry as necessary because they are either not concerned about a disaster or feel confident that they along with their support network will be able to access the services they need.

While there are many ways to reach individuals who receive government services, there are many who do not and may not be known to the community. Smaller communities appear to know of the individuals who will require additional support. Neighbors know each other and willingly 'take care of their own'.

Often community based agencies (long term care, home help, community based service providers, advocacy and other not for profits) maintain their own registries and have made local responders aware of their existence and their ability to assist in an emergency situation. While this will ease some confusion for services during an emergency, without internal protocols these registries may be of no use.

Many areas utilize key citizens, religious communities and community groups ready to share the preparedness message with senior citizens centers, schools and other groups. These activities need to be encouraged at all levels by offering training and resources.

Action Items:

- i. Define Special Needs -The state should adopt an 'official' definition of 'special needs'. This definition is key to further develop other areas of support for local communities in developing policies and protocols for this population.
- ii. Develop a standard registry -The state should develop a template for a registry that can be utilized by all citizens in Kentucky who meet the 'special needs' definition.
- iii. Develop criteria for state and local utilization. This should include whether the registry is voluntary or mandatory, who has access to the information, who can input information, how frequently the information will be updated, who will hold responsibility for updating, will the information be in a centralized location or will it be kept by regional or locality.
- iv. Determine who should carry overall responsibility for the registry and can the information be computer and/or paper based.
- v. Develop workable methods for attracting individuals and organization to utilize the registry
- vi. Make recommendations on how to remove the 'special' stigma associated with the registry, make recommendation on whether the registry is voluntary or mandatory, address plans for assuring that the data is accurate by developing a method for periodic updates of the registry.
- vii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials and personnel and needed legislation or administrative rules changes to enact any proposal.

A. 2.Issue: Personal Responsibility

Personal Responsibility is a common theme when discussing disaster preparedness. Many individuals regardless of disability and/or age do not recognize emergency preparedness as a priority. This could be a result of many factors, including lack of awareness, their current personnel situation does not lend it's self to thinking beyond the present, mental/physical status, and the naïve assumption that emergency personnel know what to do and will be there to assist. Further; many individuals with disabilities, the elderly and those with communication challenges resent the fact that they are considered 'special'. They do not want to be put in a category that is different from 'others'.

First Responders have expressed frustration, especially following Katrina, that individuals are not more proactive. The assumption that there will be assistance and it is a First Responders job to have knowledge of specific individual needs can be both overwhelming and frustrating. First Responders know that in an emergency situation resources will be limited and the more prepared individuals are the greater the likelihood of a successful outcome. While this is true for the general population it is especially true for those who have special needs.

Some communities have taken the initiative to encourage personal responsibility for themselves and those who support them. Methods that have worked include holding workshops on preparedness for individuals, long term care facilities, community support agencies and others who provide support to individuals with disabilities and the elderly. These workshops include materials on developing and maintaining a "Home Plan" which includes, a map of the home, who is residing in the home including animals and what type of assistance will be needed to evacuate and/or stay in place, where medications are stored, permission to search and rescue in their home. Participants are also shown how to turn off utilities as well as other life saving techniques. Participants are encouraged to utilize materials that are readily available, to update their plans every six months, to keep a copy of the important documents in the home and in another safe local. Finally participants are encouraged to utilize a registry, if one is available, and/or notify emergency personnel of their location and their specific needs.

Individuals and families who rely on in-home services should receive support from agencies that provide in home care. These agencies should assist families in developing an evacuation plan, both stay in place and evacuation. Congregate facilities should have plans, for both stay in place and evacuation, and share this information with emergency personnel in county. An up to date listing of patients along with services needed should be maintained at a secondary location by any agency that provides direct support.

Action Items:

- i. Develop a plan for assisting in raising awareness of the need for personal preparedness.
- ii. Assist large congregate facilities, home care providers and residential support providers in development of plans that allow them to be self sustaining when conditions call for such action.
- iii. Recognize that the key is to assuring that preparedness is not a disability, aging and/or communication challenged issue; it is an issue for all citizens.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials and personnel and needed legislation or administrative rule changes to enact any proposal.

A.3. Identification methods for individuals who are ‘special needs’ would make it impossible to communicate their name, a support person or other pertinent information.

In any disaster situation there will be individuals who will be disoriented and unable to communicate where their support network can be located. If an individual becomes separated from their support network and the individual is unable to communicate where to locate them, it could lead to this individual requiring care beyond what may be necessary. This particularly applies to small children, individuals with disabilities such as Autism or mental retardation, and those with Dementia and Alzheimer’s.

Many states have wrestled with this issue as it is difficult to have an individual carry an ID with specific information without risking the information being used for other actions that may not be in the individuals best interest and/or stereotyping the individual as having a special need.

Action Item:

- i. Develop an identification system that will assist “First Responders” in identification of an individual.
- ii. The method should take into account the privacy of the individuals and their support network.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials and personnel and needed legislation or administrative rules changes to enact any proposal.

A.4. Issue: State Emergency Plans to address disabilities, the elderly and the communication challenged

At present local emergency plans are not required to specifically address disabilities and the elderly. They are required to make a notation of an awareness that this population does exist within their communities.

Action Items:

- i. Work with regional and local entities to assure that all emergency plans address ‘special needs’.
- ii. Provide needed technical assistance
- iii. Monitored the plans for compliance.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials and personnel and needed legislation or administrative rules changes to enact any proposal.

A.5. Issue: Develop methodologies of locating, notifying and providing support to individuals with disabilities, the elderly and the communication challenged if a registry is not available or inadequate.

Local communities need to develop alternate and immediate methods of notification, locating and providing support to individuals. While a registry would be the most effective, thus far communities have reported that they have not been as successful as projected.

Utility companies utilize GPS systems for tracking those who utilize their service. They have the ability to locate those individuals who need immediate service, such as electricity due to medical necessity, in the event of an outage. A similar method of locating individuals may be an option for some communities. If telephone lines were open or available, systems such as reverse 911, life line systems could be a method of notification.

The uses of NOAA, civic and volunteer organizations in local communities are other methods that have been suggested to notify special needs populations. KOIN, CSEPP, CERT'S, ministers, family, church members, neighborhood associations and other community organizations can and should be utilized to get information out to individuals who will not answer the door or are bedridden.

Along with current and emerging technology related tools, communities need to develop capacity for interrupters. This can be achieved by creating a team of volunteers who could work alongside First Responders and/or as apart of a CERT team.

Action items:

- i. Assist local communities in developing protocols for alternate methods of communication.
- ii. Remain apprised of emerging trends in communication and their practical use in emergency situations.
- iii. Review KOIN protocol on usage of ethnic media outlets that will broadcast information in Spanish.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

A.6. Issue: Assure that all citizens, especially those with special needs have access to a 72 hour preparedness kit.

Many individuals with disabilities and the elderly do not have the financial ability to keep an emergency kit available. The ability to maintain 72 (seventy two hours) of medications and other durable medical supplies is not feasible due to insurance companies, including Medicaid regulations. Insurance companies do not offer the ability to obtain additional medication and other medical supplies in excess of what is needed per month.

It has been suggested that individuals refrain from taking prescribed medication on occasion and store them over a period of time. This is not a prudent or safe undertaking for any prescribed medication, but at present it is the only alternative for securing an excess supply of medication and other medical supplies.

Public Health does maintains 'pod's' that contain needed supplies, but in certain situations it may be difficult for 'First Responder' to locate and/or have access to individuals therefore making it impossible to deliver necessary life saving supplies.

Action Items:

Objective: Convene a stakeholder group that includes insurance companies and regulators, pharmacies, and doctors should convene to:

- i. Develop methodologies to assure that every individual has access to a 72 hour emergency kit, including prescribed medications and durable supplies.
- ii. Address the issue decreasing the risk of abuse of the opportunity, replacement of expired medications and supplies and safe storage.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

A.7. Issue: Adequate training for First Responders in the area of 'special needs'.

Many First Responders have had some contact with and some training in the area of special needs. In a disaster situation, when the stress levels increase it is not uncommon for individual challenges to increase regardless of special needs. If First Responders are better prepared the likelihood of a successful rescue will increase.

Action Items:

- i. Develop training and resource materials to increase awareness for First Responders.
- ii. Require on-going training and activities in the area of 'special needs'.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

A.8. Issue: Easing fear of the emergency response system

Many individuals regardless of disabilities are fearful and uncertain about the entire emergency response system. People need to become familiar with how the system works and what to expect.

Action items:

- i. Encourage local/regional and state personnel to hold mock drills/pilot programs and invite individuals with disabilities, the elderly and those with communication challenges to participate.
- ii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B. Response

B.1. Issue: Moving people and services

Moving people from one location to another and/or delivering supplies is a difficult and strategic task. If first responders are not aware of the special support and equipment needs of individuals they will not be able to provide adequate transportation and/or needed services.

Action items:

- i. Develop a workable plan for assessing the transportation needs of those who need specialized transportation in the event of an evacuation should occur.
- ii. Create logical coordination, modes of transportation including but not limited to unconventional modes, such as flat bed trucks. A plan such as the one developed in Galveston, TX could be used as a template.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B.2. Issue: Easing fear of the emergency response system

Many individuals regardless of disabilities are fearful and uncertain about the entire emergency response system especially sheltering. People need to become familiar with their shelter and the services and support it will provide.

Action Items:

- i. Provide tours, open houses of and presentations about shelters in order for individuals to know what to expect and where to go in the event of an emergency.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B.3. Issue: Accessing and creating accessible sheltering

Not all communities have large buildings that are accessible to the all citizens. Larger communities potentially have shelters but there is often not enough room for people who require specialized services. Further, if shelters are available they may not meet the needs of those who may require non traditional supports.

The American Red Cross (ARC) has created a definition for 'special needs' and at the present time they do not provide sheltering for those who fall under their special needs definition. If the ARC is, or is not the local sheltering entity, it is incumbent on that community to develop alternate plans to address the needs of those who do not be met the guidelines at ARC shelters.

Many 'special needs' shelters, while deeming themselves to be accessible may indeed only meet the minimal ADA standards. There are considerations besides basic accessibility that need to be addressed. Needs such as additional electrical outlets, restrooms, alternative forms of communication and privacy areas are essential to ensure adequate support. Essential people in individuals' lives can be a determining factor in the amount of support that is needed for sheltering therefore families and care takers needs must also be addressed.

Action items:

- i. Utilizing the 'Special Needs' definition adopted by the ARC and Kentucky, review the sheltering needs of those with special needs and how each community can address those needs.
- ii. Assure that communities can meet the sheltering needs of all community members.
- iii. Evaluate all shelters to ensure they meet the minimal standards of the ADA. Individuals familiar with accessibility and accommodation issues should be accessed to provide support in accessing barriers and providing ideas for supporting possible changes to facilities to assure accessibility.
- iv. Review options that may include one stop assessment centers where appropriate personnel are available that can provide assessment and are able to send individuals to settings that will support their needs.
- v. Ensure coordination within the regions and throughout the state to assure that families and individual support networks are kept together.
- vi. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.4. Issue: Sheltering and evacuation of service animals

Following Katrina a federal law H.R. 3835 was passed to specifically address sheltering and accommodation of service animals. It is well documented that all pets, especially service animals play a role in individuals' ability to maintain independence and in assisting an individual in their ability to cope with a disaster. Service animals in particular need to be kept with their owners as many provide independence that would not otherwise be possible.

Action Items:

- i. Develop a working agreement and plan to ensure the rescue and sheltering of all animals in need have support.
- ii. Review the animal rescue training offered by the American Humane Society for a volunteer rescue team to support 'First Responders'.
- iii. Assure that necessary laws are in place to protect all animals.
- iv. Review the plan adopted by Houston, TX as a possible template for animal rescue and sheltering.
- v. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.5. Issue: Liability for all professional and volunteers

Professionals and those who volunteer their services during a disaster are often placed in high risk situations. Concerns have and are being raised about how to protect these individuals from the potential of liability. Protection is also necessary for those agencies that support these professionals and volunteers. Both agency and individuals, professionals and volunteers, need protection to assure that they can work effectively without fear of reprisal.

Action Items:

- i. Track and respond to federal legislation regarding professional and volunteer liability.
- ii. Review Kentucky liability information to assure that it offers needed protection to professionals and volunteers.
- iii. Adopt necessary regulations to assure protection for both professionals and volunteers.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.6. Issue: Assuring that needed equipment is available

The need for specialized equipment and supplies such as wheelchairs, specialized beds, lifts, and other equipment may not be readily available during a disaster. A shortage or lack of availability of necessary equipment could potentially make a difference in the type and level of support an individual may need. Public health does have 'pods' available that contain emergency medical supplies and medications, however assuring that other supplies such as large durable medical supplies are available for sheltering is of concern for those who will utilize a shelter.

The PODs would be for people who would be coming to the PODs for very short periods of time just to get their meds and then leave. Most LHDs are planning on limited home distribution of meds for the home-bound population for a public health emergency. As for the shelters, Many EMA's have partnered with the LHDs and have agreements to utilize resources from these agencies. It would be impossible to cannot fully plan for every type of individual that may require sheltering, and therefore it is encouraged where possible that individuals bring all of the equipment that they feel is necessary for sustainment of their duration in the shelter. While this is not the optimal solution, it is at least a positive step in the right direction.

Action Items:

- i. Assure that all sheltering plans have a coordinated method for deployment of durable medical supplies and other items that may be needed to assure that needed non-personnel related supports are available.
- ii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal
- iii. EMA will partner with the LHDs to utilize resources for these special needs individuals in the shelters.

B.7. Issue – Determination of evacuation status if a shelter is not available and/or conditions do not warrant moving the person.

At the present time there is not a clear criteria for ‘First Responders’ to use to determine if an individual should remain in place or be evacuated or if that is an option based on the circumstances. If there is a determination that either transportation and/or shelter cannot support a specific need, emergency personnel along with the individual will need to make a decision as to the most appropriate and safe way to support that individual.

Action Items:

- i. Development of guidelines for assessing the best options for the individuals based on safety, well being, quality and quantity of support.
- ii. This assessment should promote options that afford the individuals the greatest independence and support.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.8 Issue: Clarification of KRS39A

KRS39A involves creating uniformity in emergency response situation. It charges that the Cabinet for Health and Family Services may promulgate administrative regulations to implement KRS 39A.350 to 39A.366. In doing so, the Cabinet for Health and Family Services shall consult with and consider the recommendations of the Kentucky Division of Emergency Management and shall also consult with and consider administrative regulations promulgated by similarly empowered agencies in other states to promote uniformity of application of KRS 39A.350 to 39A.366 and make the emergency response systems in the various states reasonably compatible. Effective: June 26, 2007 (ky.gov/legislation:8/24/2007) there appears to be some confusion as to whether the administrative regulations have been developed. If so what impact do these regulations have on ‘first responders’ and others involved in emergency support services.

Action Items:

- i. Offer an overview of KRS39A to individuals who are first responders.
- ii. Assure that the overview is easily comprehensible
- iii. Provide updates as warranted.

B.9. Issues: Communication Challenges

Language barriers, non-English speaking and those who do not communicate by traditional means pose a dilemma for shelter workers. In an emergency situation sheltering the lack of ability to communicate can lead to confusion when providing instructions and attempting to provide support. Entities such as KOIN and some CERT teams have members who can translate and tailor specific messages to individuals. KOIN also contains ethnic media outlets that will broadcast information in Spanish.

Action Items:

- i. Assure that entities such as KOIN continue to have members that will translate and tailor messages to specific vulnerable populations.
- ii. Continue to assure that Local health departments have access to language lines and interpreters.
- iii. Support the broadcast media that will run crawl lines and larger newspapers that will have the ability to run special pages in both English and Spanish during emergencies.
- iv. All recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.10. Issue: A statewide coordination for supports for individuals with disabilities.

Many have claimed that there is a lack of coordination in some areas of the state on supporting people with special needs. There are several states and local governmental agencies working on emergency management for citizens, yet it is unclear to some if they are communicating. Further, there are non governmental agencies working on the same aspects of emergency management. Those that are attempting to reach out to citizens are attempting to stay up to date on that information and materials. This leads to confusion as to where and who to turn to for resources.

Action Items:

- i. Assure a coordinated central location for information and resources input and dissemination that anyone can access to obtain up to date and accurate information on all phases of Emergency Management
- ii. Assure that all Health departments, medical supply companies, ARC's, local emergency management and local agencies that support vulnerable populations and individuals with disabilities are communicating the same message throughout the state.
- iii. Assure that all shelter trainings include a component regarding special needs sheltering and that the message is consistent regardless of the organization providing the presentation.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

B.11. Issue: Assistance to and assistance from congregate facilities, community residential entities, home help and day programs.

Community based entities that provide support, either 24/7 or day programming do not have the manpower to take the lead for sheltering special needs. They may find themselves in a staffing shortage if the personnel are not able to come to work due to the disaster. However, they would be a good resource for developing protocols and with support they could be possible locations for a special needs shelter as many already have the specialized equipment, training and personnel to support this population.

Action Items:

- i. Develop methods to coordinate and utilize the facilities, equipment, training and personnel of agencies that already provide services to some 'special needs' populations.
- ii. This should be achieved on a state and local level.
- iii. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B.12. Issue: The potential use of detention centers and jails in supporting special needs populations.

While detention centers and jails appear to be unlikely locations for sheltering special needs populations, with the appropriate safe guards they could be potential location. These facilities meet many of the needs that a specialized shelter would require.

Action Items:

- i. Assess the viability for utilizing jails and detention centers for sheltering individuals with special needs.
- ii. Difarencate between local and county jails and the state and federal prison system.
- iii. If an affirmative decision is made, develop protocol to assure the safety and wellbeing for those who will utilize the shelter and the workers.
- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B.13. Issue: HIPPA Regulations

It is difficult to provide supportive services without the ability to obtain necessary information. HIPPA regulations appear to be a barrier to service as records and other pertinent information cannot be accessed without permission. Health information also cannot be transferred from one entity to another with permission. This makes it difficult to provide adequate services during sheltering whether in place or at a shelter. This can also hinder provision of needed support to individuals who have limited ability to express medical information and/or give permission for treatment.

Action Items:

- i. Track and respond to federal legislation regarding HIPPA regulations.
- ii. Adopt necessary regulations to assure individuals privacy is protected while assuring that necessary and appropriate care is provided.
- iii. Adopt necessary regulations to assure individuals providing care are protected while assuring that necessary and appropriate care is provided.

- iv. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal

C. Recovery

C.1. Issue: Restoration of essential services.

Restoration of essential services at both the public and private level is imperative following a disaster. For individuals with disabilities, the elderly and their families it can mean the difference in the types of support that are warranted. Local/regional and state entities along with the business community need to have emergency plans in place that address the restoration of essential services resumption and how citizens will be notified when these services are available.

Action Items:

- i. Address how local businesses (hardware stores, grocery, pharmacy, bank, school personnel, and meals on wheels) will notify the community that they are open.
- ii. Plan should include the utilization of media, government liaisons, public services, e-mail, distribution lists, word of mouth, reverse 911, satellite phones, and joint information centers.
- iii. Require all businesses to have disaster plans that specifically address recovery. The plan should include training of all employees by holding or participating in a mock drill 2-3 times per year. The plan should also include employee assistance programs, temporary housing to employees and families either in or near work site, medical and insurance needs and other benefits currently offered by the employer.
- iv. Emergency management should offer independent evaluation of drills and information/resources on support of employees after a disaster.
- v. Any recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

B.2. Issue: Restoration of entitlement benefits and insurance benefits.

One of the greatest concerns is assuring that individuals will have access to needed benefits. Losing ones identity during a disaster and having systems that cannot respond to the needs of individuals who utilize entitlements and medical insurance can quickly lead to homelessness and decline in health status.

Many individuals rely on SSI, SSDI, Medicare, and other entitlements as part of their daily lives. If the providers of those services are not operational it is impossible to assist these individuals in returning to homes and/or other living arrangements.

Those that require medical support, home and auto repair and are unable to access the insurance carrier will also find themselves in an increasingly vulnerable situation.

Action Items:

Assure that all governmental entities and insurance carriers have developed adequate protocols for restoration of services within a timely manner.

- i. Address how government and insurance carriers will notify the community that they are open.
- ii. Plan should include the utilization of media, government liaisons, public services, e-mail, distribution lists, word of mouth, reverse 911, satellite phones, and joint information centers.
- iii. Require all businesses to have disaster plans that specifically address recovery. The plan should include training of all employees by holding or participating in a mock drill 2-3 times per year. The plan should also include employee assistance programs, temporary housing to employees and families either in or near work site, medical and insurance needs and other benefits currently offered by the employer.
- iv. Emergency management should offer independent evaluation of drills and information/resources on support of employees after a disaster.
- v. All recommendations will include consideration of the cost of maintaining the needed equipment/materials, personnel and needed legislation or administrative rules changes to enact any proposal.

VI. NEXT STEPS

1. The delegation will continue to meet on a regular basis to share information and to update the action grid.
2. The report will be placed on the Kentucky Council on Developmental Disabilities website and links will be provided for others.
3. All updates will be posted in a timely manner.
4. The grid will be updated as warranted.
5. The delegation will hold regular summits for other stakeholders for the purpose of information gathering and education.
6. The delegation will continue to expand the group to include others who are vital to the process.

VII. CONCLUSION

The original delegation which started out as five members has expanded to fifteen and continues to grow. This group has become a resource for information sharing and idea generation. From the meetings the stakeholders are able and willing to take ideas information back to their agency for further follow-up. The collaboration and results have shown good results. The delegation will hold future state summits to provide gather information on and provide education to statewide stakeholders in the area on emergency management.

VIII. ISSUES GRID

The issues grid will be the document that will be used to provide updates on the status of each topic area that was defined during the 07 Kentucky Summit. It will be updated and amended as warranted.

IX. APPENDECES

1. Terms
2. Delegation members
3. Resources

APPENDIX A

ISSUES GRID



ISSUES

ACTION ITEMS

A. Preparedness

A.1. Special Needs Registry and Definition

- viii. Define Special Needs -The state should adopt an ‘official’ definition of ‘special n
definition is key to further develop other areas of support for local communities in
policies and protocols for this population.
- ix. Develop a standard registry -The state should develop a template for a registry tha
utilized by all citizens in Kentucky who meet the ‘special needs’ definition.
- x. Develop criteria for state and local utilization. This should include whether the reg
voluntary or mandatory, who has access to the information, who can input inform
frequently will the information be updates, who will hold responsibility for updati
information be in a centralized location or will it be kept by regional or locality.
- xi. Determine who should carry overall responsibility for the registry and can the info
computer and/or paper based.
- xii. Develop workable methods for attracting individuals and organization to utilize th
The group should make recommendations on how to remove the ‘special’ stigma :
with the registry, make recommendation on whether the registry is voluntary or m
address plans for assuring that the data is accurate by developing a method for per
updates of the registry.
- xiii. Any recommendations will include consideration of the cost of maintaining the ne
equipment/materials and personnel and needed legislation or administrative rules
enact any proposal.

A.2. Personal

- v. Develop a plan for assisting in raising awareness of the need for personal prepare

- | | |
|----------------|---|
| Responsibility | <ul style="list-style-type: none"> vi. Assist large congregate facilities, home care providers and residential support providers with the development of plans that allow them to be self sustaining when conditions call for emergency action. vii. Licensing and accreditation standards should take into consideration emergency preparedness. viii. Recognize that the key is to assuring that preparedness is not a disability, aging and communication challenged issue; it is an issue for all citizens. ix. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal. |
|----------------|---|

- | | |
|--|---|
| A.3. Identification methods

for individuals who's

'special needs' would make

it impossible to

communicate their name, a

support person or other

pertinent information | <ul style="list-style-type: none"> iv. Develop an identification system that will assist "First Responders" in identifying the individual. v. The method should take into account the privacy of the individuals and their support person. vi. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal. |
|--|---|

- | | |
|---|---|
| A.4. Issue: State Emergency

Plans to address disabilities,

the elderly and the

communication challenged | <ul style="list-style-type: none"> v. Will work with regional and local entities to assure that all emergency plans address the needs of the elderly and the communication challenged. vi. Provide needed technical assistance vii. Monitored the plans for compliance. viii. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal. |
|---|---|

enact any proposal.

A.5. Issue: Develop methodologies of locating, notification and providing support to individuals with disabilities, the elderly and the communication challenged if a registry is not available or inadequate

- v. Assist local communities in developing protocols for alternate methods of communication.
- vi. Remain apprised of emerging trends in communication and their practical use in emergency situations.
- vii. Review KOIN protocol on usage of ethnic media outlets that will broadcast information in Spanish.
- viii. All recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to enact any proposal.

A.6. Issue: Assure that all citizens, especially those with special needs have access to a 72 hour preparedness kit.

- iv. Develop methodologies to assure that every individual has access to a 72 hour emergency kit including prescribed medications and durable supplies.
- v. Address the issue decreasing the risk of abuse of the opportunity, replacement if emergency medications and supplies and safe storage.
- vi. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to enact any proposal.

A.7. Issue: Adequate training for First Responders in the area of 'special needs'

- iv. Develop training and resource materials to increase awareness for First Responders.
- v. Require on-going training and activities in the area of 'special needs'.
- vi. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to enact any proposal.

enact any proposal.

A.8. Issue: Easing fear of
the emergency response
system

- iv. Encourage local/regional and state personnel to hold a mock drills/pilot programs individuals with disabilities, the elderly and those with communication challenges participate.
- v. Any recommendations will include consideration of the cost of maintaining the ne equipment/materials and personnel and needed legislation or administrative rules enact any proposal.

B. RESPONSE

- B.1.** Issue: Moving people and services

iv.

Develop a workable plan for assessing the transportation needs of those who need transportation in the event of an evacuation should occur.

v.

Create logical coordination, modes of transportation including but not limited to unconventional modes, such as flat bed trucks. A plan such as the one developed in TX could be used as a template.

vi.

Any recommendations will include consideration of the cost of maintaining the new equipment/materials and personnel and needed legislation or administrative rules to enact any proposal
- B.2.** Issue: Easing fear of

i.

Provide tours, open houses of and presentations about shelters in order for individ

the emergency response
system

what to expect and where to go in the event of an emergency.

- ii. Any recommendations will include consideration of the cost of maintaining the new equipment/materials and personnel and needed legislation or administrative rules and to enact any proposal.

**B.3. Issue: Accessing and
creating accessible
sheltering**

- vii. Utilizing the ‘Special Needs’ definition adopted by the ARC and Kentucky, review sheltering needs of those with special needs and how each community can address them.
- viii. Assure that communities can meet the sheltering needs of all community members.
- ix. Evaluate all shelters to ensure that meet the minimal standards of the ADA. Individuals familiar with accessibility and accommodation issues should be accessed to provide information on accessing barriers and providing ideas for supporting possible changes to facilities to improve accessibility.
- x. Review options that may include one stop assessment centers where appropriate personnel are available that can provide assessment and are able to send individuals to settings that support their needs.
- xi. Ensure coordination within the regions and throughout the state to assure that family and individuals support networks are kept together.
- xii. Any recommendations will include consideration of the cost of maintaining the new equipment/materials and personnel and needed legislation or administrative rules and to enact any proposal

B.4. Issue: Sheltering and

- vi. Develop a working agreement and plan to ensure the rescue and sheltering of all animals.

evacuation of service

need have support.

animals

- vii. Review the animal rescue training offered by the American Humane Society for a rescue team to support ‘First Responders’.
- viii. Assure that necessary laws are in place to protect all animals.
- ix. Review the plan adopted by Houston, TX as a possible template for animal rescue sheltering.
- x. Any recommendations will include consideration of the cost of maintaining the ne equipment/materials and personnel and needed legislation or administrative rules , enact any proposal

B.5. Issue: Liability for all
professional and volunteers

- v. Track and respond to federal legislation regarding professional and volunteer liab
- vi. Review Kentucky liability information to assure that it offers needed protection to professionals and volunteers.
- vii. Adopt necessary regulations to assure protection for both professionals and volunt
- viii. Any recommendations will include consideration of the cost of maintaining the ne equipment/materials and personnel and needed legislation or administrative rules , enact any proposal

B.6. Issue: Assuring that
needed equipment is
available

- iv. Assure that all sheltering plans have a coordinated method for deployment of dur: supplies and other items that may be needed to assure that needed non-personnel r supports are available.
- v. Any recommendations will include consideration of the cost of maintaining the ne equipment/materials and personnel and needed legislation or administrative rules , enact any proposal.

- vi. EMA will partner with the LHDs to utilize resources for these special needs individuals and shelters.

B.7. Issue – Determination
of evacuation status if a
shelter is not available
and/or conditions do not
warrant moving the person.

- iv. Develop of guidelines for assessing the best options for the individuals based on safety, health, well-being and quality and quantity of support.
- v. This assessment should promote options that afford the individuals the greatest independence and support.
- vii. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal

B.8 Issue: Clarification of
KRS39A

- iv. Offer an overview of KRS39A to individuals who are first responders.
- v. Assure that the overview is easily comprehensible
- vi. Provide updates as warranted.

B.9. Issues:
Communication Challenges

- v. Assure that entities such as KOIN continue to have members that will translate and disseminate messages to specific vulnerable populations.
- vi. Continue to assure that Local health departments have access to language lines and professional interpreters.
- vii. Support the broadcast media will run crawl lines and larger newspapers will have and run special pages in both English and Spanish during emergencies.
- viii. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal

B.10. Issue: A statewide

- v. Assure a coordinated central location for information and resources input and dissemination

coordination for supports for individual with disabilities.

that anyone can access to obtain up to date and accurate information on all phases
Emergency Management

- vi. Assure that all Health departments, medical supply companies, ARC's, local emergency management and local agencies that support vulnerable populations and individuals with disabilities are communicating the same message through out the state.
- vii. Assure that all shelter trainings include a component regarding special needs sheltering that the message is consistent regardless of the organization providing the presentation.
- viii. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal.

B.11. Issue: Assistance to and assistance from congregate facilities, community residential entities, home help and day programs.

- iv. Develop methods to coordinate and utilize the facilities, equipment, training and personnel of agencies that already provide services to some 'special needs' populations.
- v. This should be achieved on a state and local level.
- vi. Any recommendations will include consideration of the cost of maintaining the necessary equipment/materials and personnel and needed legislation or administrative rules to support and enact any proposal.

B.12. Issue: The potential use of detention centers and jails in supporting special needs populations.

- v. Assess the viability for utilizing jails and detention center for sheltering individuals with special needs.
- vi. Differentiate between local and county jails and the state and federal prison system.
- vii. If an affirmative decision is made develop protocol to assure the safety and well-being of all individuals.

who will utilize the shelter and the workers.

- viii. Any recommendations will include consideration of the cost of maintaining the ne
equipment/materials and personnel and needed legislation or administrative rules
enact any proposal.

B.13. Issue: HIPPA
Regulations

- v. Track and respond to federal legislation regarding HIPPA regulations.
- vi. Adopt necessary regulations to assure individuals privacy is protected while assur
necessary and appropriate care is provided.
- vii. Adopt necessary regulations to assure individuals providing care are protected wh
that necessary and appropriate care is provided.
- viii. Any recommendations will include consideration of the cost of maintaining the ne
equipment/materials and personnel and needed legislation or administrative rules
enact any proposal

C. RECOVERY

C.1. Issue: Restoration of

essential services.

- vi. Address how local businesses (hardware stores, grocery, pharmacy, bank, school and meals on wheels) will notification the community that they are open.
- vii. Plan should include the utilization of media, government liaisons, public services, distribution lists, word of mouth, reverse 911, satellite phones, and joint information.
- viii. Require all businesses to have disaster plans that specifically address recovery. The plan should include training of all employees by holding or participating in a mock drill per year. The plan should also include employee assistance programs, temporary housing for employees and families either in or near work site, medical and insurance needs and benefits currently offered by the employer.

- ix. Emergency management should offer independent evaluation of drills and information/resources on support of employees after a disaster.
- x. Any recommendations will include consideration of the cost of maintaining the new equipment/materials and personnel and needed legislation or administrative rules to enact any proposal.

C.2. Issue: Restoration of entitlement benefits and insurance benefits.

- vi. Address how government and insurance carriers will notification the community open.
- vii. Plan should include the utilization of media, government liaisons, public services, distribution lists, word of mouth, reverse 911, satellite phones, and joint information.
- viii. Require all businesses to have disaster plans that specifically address recovery. The plan should include training of all employees by holding or participating in a mock drill per year. The plan should also include employee assistance programs, temporary housing for employees and families either in or near work site, medical and insurance needs and benefits currently offered by the employer.
- ix. Emergency management should offer independent evaluation of drills and information/resources on support of employees after a disaster.
- x. Any recommendations will include consideration of the cost of maintaining the new equipment/materials and personnel and needed legislation or administrative rules to enact any proposal.

AAPENDIX B

TERMS



ACRONYMNS AND DEFINITIONS

First Responder: the first person, e.g. an emergency medical technician or a police officer, who arrives at the scene of a disaster, accident, or life-threatening medical situation. The first responder's duties include providing medical assistance and calling other emergency caregivers to the scene.

NOAA - National Oceanic and Atmospheric Administration

KOIN - Kentucky Outreach and Information Network

CSEPP - Chemical Stockpile Emergency Preparedness Program

CERT - Certified Emergency Response Team

ARC- American Red Cross

EMA - Emergency Management Agency

HIPPA- Health Insurance Privacy and Portability Act

SSI - Social Security Insurance

SSDI Social Security Disability Insurance

APPENDIX C

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APPENDIX D

RESOURCES



RESOURCES WITH EMERGENCY AND DISASTER INFORMATION

Before you make your plan, look for tips and guides about emergencies and disasters. The Internet has many sites about preparing for emergencies and is your best resource. If you don't have a computer, call or visit your local library, school, community center, or parent group and ask for assistance finding emergency information to help you make a plan.

- Department of Homeland Security Releases New Preparedness Resources for Seniors, People with Disabilities and Pet Owners:
www.dhs.gov/xnews/releases/pr_1187027722320.shtm
- Emergency Medical System for Children/ EMSC. Visit www.ems-c.org, and click on Rehabilitation and Children with Special Needs to find materials like an Emergency Care/ Plan, as well as booklets and CD's for specific diagnosis or purposes. Phone is 202/ 884- 4927.
- American Academy of Pediatrics (AAP). Going to www.aap.org, you will find a special section called Children Terrorism and Disasters, Where disaster plan kits and other information can help you.
- American Red Cross. Call your local chapter or visit www.americanredcross.org where there is information about emergency planning and tips for people with disabilities.
- Independent Living Center of San Francisco. Go to www.ilrcsf.org to find excellent materials in several languages, from tip sheets to basic preparedness. Or call 415/ 543-6222
- The National Safety Council. Visit www.nsc.org for sections on Emergencies and Disasters, Checklist from home, and links to the Red Cross and other resources. Toll Free: 800/ 621-7619
- Family Voices, www.familyvoices.org, is a wonderful source of information about kids with special needs, listing family leader contacts in each state. State and National activities, publications, and issues facing our families and children. Toll Free: 888/ 835-5669
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Government Sites and Links:

- Department of Homeland Security
- Department of Health and Human Services Office for Civil Rights:
www.hhs.gov/ocr/hipaa/emergencyPPR.html

- Department of Health and Human Services:
www.hhs.gov/Katrina/index.html
- Administration for Children and Families:
www.acf.hhs.gov/katrina/index.htm

Coping with Disaster- Links to Guides and Publications:

- Managing Traumatic Stress: Hurricane Katrina and Children:
www.apahelpcenter.org/articles/article.php?id=109
- Managing Traumatic Stress: After Hurricane Katrina:
www.apahelpcenter.org/articles/article.php?id=107
- Managing Traumatic Stress: Dealing with Hurricane Katrina from Afar:
www.apahelpcenter.org/articles/article.php?id=108

FEMA- A Guide to Disaster Declaration Process and Federal Disaster Assistance:
www.fema.gov/pdf/rrr/dec_proc.pdf

American Red Cross:
www.redcross.org

Guides and Publications

- American Red Cross: Disaster Preparedness Guide for People with Special Needs and Persons Age 65 and Older:
www.redcross.org/services/disaster/beprepared/disability.pdf

National Organization on Disability
www.nod.org

Federal Emergency Management Agency (FEMA): www.fema.gov

- Assisting People with Disabilities in a Disaster
www.fema.gov/plan/prepare/specialplans.shtm

The Job Accommodation Network:

- www.acf.hhs.gov/exit_page.html?http://www.jan.wvu.edu
- www.jan.wvu.edu

Office of Disability Employment Policy:
www.dol.gov/odep/